

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number **10/540** 93 2

CLAIMS AS FILED - PART I								SMALL ENT	ПТҮ	<b>O</b> B	OTHER THAN	
			(Colum	ın 1)		(Column 2)	<b>7</b> /	TYPE	<u> </u>	OR 1	SMALL E	ENTITY
U.S	. NATIONAL S	STAGE FEES			<u> </u>			RATE	FEE		RATE	FEE
BAS	SIC FEE		SMALL ENT.	. = \$ 150	LARG	LARGE ENT. = \$ 300		BASIC FEE		OR	BASIC FEE	300
EXAMINATION FEE			Satisfies PCT A (4) = \$50	0/\$100	\$	All other situations = \$ 100 / \$ 200		EXAM. FEE			EXAM. FEE	200
SEARCH FEE			U.S. is ISA = \$ ALL other cot \$ 200 / \$	ountries =	Allott	All other situations = \$ 250 / \$ 500		SEARCH FEE			SEARCH FEE	408
FEE	FOR EXTRA S	SPEC. PGS.	min	nus 100 =		/ 50 <b>=</b>	]	X \$ 125 =			X \$ 250 =	
тот	TAL CHARGEAE	BLE CLAIMS	S mi	inus 20 =	*		]	X \$ 25 =		OR	X \$ 50 =	
INDI	EPENDENT CL	AIMS	1 n	minus 3 =	*			X \$ 100 =		OR	X \$ 200 =	
MUL	TIPLE DEPEN	IDENT CLAIM PRE	ESENT				1	+ \$ 180 =		OR	+ \$ 360 =	
* If	the difference	e in column 1 is l	less than zer	o, enter "(	0" in cc	olumn 2		TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							- <b>-</b>	OTHER T SMALL ENTITY OR SMALL EN				
NT A		CLAIMS REMAINING AFTER AMENDMENT			MBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE .	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	]	X \$ 25 =		OR	X \$ 50 =	
AME	Independent	*	Minus	***		=		X \$ 100 =		OR	X \$ 200 =	
	FIRST PRES	SENTATION OF M	IULTIPLE DEP	ENDENT	CLAIM			+ \$ 180 =		OR	+ \$ 360 =	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
NTB		CLAIMS REMAINING · AFTER AMENDMENT		HIGH NUMI PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		Ė		X \$ 25 =		OR	X \$ 50 =	
AMEN	Independent	*	Minus	***		= /		X \$ 100 =		OR	X \$ 200 =	· · · · · ·
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+ \$ 180 =	·	OR	+ \$ 360 =	
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".												

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875 (Rev. 02/2005)